

MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Final
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Meeting Name: IPRS Core Team Meeting
Facilitator: Eric Johnson, DMH
Scribe: Carlisa Stallings
Date: 12/20/06
Time: 10:30 – 11:30 a.m.
Location: Hargrove, Conference Room D

IPRS Core Team Attendees:

x Rick Kretschmer	Others:
Cathy Bennett	x Tim Sullivan
x Cheryl McQueen	x Jamie Herubin
Sara Parks	x Sandy Flores
Gary Imes	Mike Frost
Joyce Sims	Myran Harris
x Rick Debell	
x Carlisa Stallings	x Kris Berry
x Thelma Hayter	
x Eric Johnson	

Attendees:

Alamance-Caswell	x Onslow-Carteret
x Albemarle	x OPC
x Catawba	x Pathways
Centerpoint	x Pitt
x Crossroads	Roanoke-Chowan
x Cumberland	x Rockingham
x Durham	x Sand hills Center
x Eastpointe	x SE Center
x Edgecombe-Nash	x SE Regional
Five – County MHA	x Smoky Mountain
x Foothills	x Tideland
x Guilford	x Wake
x Johnston	x Western Highlands
x Mecklenburg	x Wilson-Greene
x Neuse	
x New River	

Attendees:

Item No. Topics

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. **Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) –January 5, 12, 19
4. Agenda items
 - 2007 IPRS Check-write Schedule... <http://www.iprs.ncxix.com/>
 - \$6,000 CM limit denial resources:
Fax materials to Marie Britt (MH/SA)...919-715-9451
 - Timely Filing
 - Residential Enrollment
 - Atypical/Typical Services - Update
 - Reminder...Send in NPI data
 - IPRS Questions or Concerns
 - MMIS Updates – Tim Sullivan & Chris Ferrell
 - Medicaid Questions or Concerns
5. DMH and/or EDS concluding remarks.
 - a. For **North Carolina Medicaid** claim questions / inquiries, please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
 - i. Physician phone analyst (i.e. Independent mental Health Providers – 4706
 - ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4704
6. Roll Call Updates

Reminder...

There will be an additional period at the end of the January 3 meeting for those who wish to ask specific questions regarding the current NPI project. Your information system vendors are welcome to join this part of the call at the above listed number.

Next Meeting: January 3, 2007

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc.,
Call the IPRS Help Desk – 1-800-688-6696, ext 53355 or 919-816-4355
, M-F, 8 a.m.-4:30 p.m., excluding holidays.

IPRS Question and Answer email address – iprs.qanda@ncmail.net

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	Roll Call
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.
3.	Upcoming Check-writes (cut-off dates) –January 5, 12, 19
4.	<p><u>Agenda items</u></p> <ul style="list-style-type: none"> • 2007 IPRS Check-write Schedule... http://www.iprs.ncxix.com/ • \$6,000 CM limit denial resources: <ul style="list-style-type: none"> ○ DMA has lifted the audit ○ Fax materials (claims, RA, supporting documentation) to Marie Britt (MH/SA)...919-715-9451 for T1017-HI claims with dates of service prior to 9/1/06; claims with dates of service 9/1/06 and beyond can be submitted directly to the system for processing ○ Sharlene sent claim and supporting documentation to DMA in October, but has not received a response. Tim asked Sharlene to send to IPRS Q&A for further research. • Timely Filing (Thelma) Thelma advised all LMEs to stop sending in claims with prior year's dates of service. Sending in these claims provides no benefit to the LMEs as had been the case in previous years. Also, this costs DMH \$.14 per claim. • Residential Enrollment (Thelma) – Update provided as follows: <ul style="list-style-type: none"> ○ IPRS system changes will be made so LMEs can not bill H0019 and H2020 services for claims with dates of service after 12/31/06. ○ LMEs will need to add the enrolled and endorsed providers to the IPRS PT screen. ○ These providers will have provider numbers starting with "66" and will be included on the IPVR0552 report. ○ When LMEs bill IPRS, they will need to use their multi-specialty group numbers. This is consistent with Medicaid. • Atypical/Typical Services – Update and answers to questions provided (Cheryl) <ul style="list-style-type: none"> ○ If provider provides any health care services, provider is considered "typical". ○ If provider does not provide any health care services at all, provider is considered "atypical". ○ Definition of health care services can be found in the "WEDI White Papers". Additional information will be forthcoming once Thelma receives approval to send. ○ If provider has an NPI number, but bills for a non-health care service, still submit claim with the NPI number. ○ When providers apply for an NPI number, they sign a clause that states that they are indeed providing health care services. If they are not, they may be fined. ○ The individual providers need to decide if they are typical or atypical. This is NOT the responsibility of the LME. Providers can visit https://nppes.cms.hhs.gov for additional information. ○ There will be no edit in the system that determines if the provider should be

<p>5.</p>	<p>typical or atypical based on the procedure code.</p> <ul style="list-style-type: none"> ○ Can use the recently distributed version from November 2006 - 837 version for both typical and atypical providers. Also this is the same version that was discussed during the Fall-2006 NC-FARO conference. ○ Providers should contact DMA when they receive their NPI number. <ul style="list-style-type: none"> • Reminder...Send in NPI data • IPRS Questions or Concerns Q: Kelly (Durham) – Can a client be in a Crisis Target Pop more than 3 days. A: Cheryl (DMH) – Yes. LME will need to send in another 3-day eligibility segment for the new 3 day period. Q: Donna (Onslow) – Who can file YP851/YP852? A: Cheryl (DMH) - These are public psychiatry procedures; A “dummy” client ID should be set up for pop group AMCEP to be used when billing these services. Also provider-specific rates must be submitted to Rick Debell. The provider must be a psychiatrist. Thelma also commented that these funds are limited. Q: Tom (Western Highlands) – Regarding memo that was communicated yesterday about NC Health Choice consumers, will IPRS recoup the funds? A: Thelma (DMH) – will research and update at the next Core Team Meeting. • Medicaid Questions or Concerns Q: Edie (Pitt) – recap of 6,000 limit for T1017-HI A: Eric (DMH) - Fax materials (claims, RA, supporting documentation) to Marie Britt (MH/SA)...919-715-9451 for T1017-HI claims with dates of service prior to 9/1/06; claims with dates of service 9/1/06 and beyond can be submitted directly to the system for processing as DMA has lifted the audit. Q: Victoria (Tideland) – Receiving case management denials, requesting CDSA referral number, but client is over the age of 3. A: Kris (EDS) – send example to IPRS QandA. Also, Thelma and Tim will get further clarification. <p><u>DMH and/or EDS Concluding Remarks:</u></p> <ul style="list-style-type: none"> • For North Carolina Medicaid claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator. <ul style="list-style-type: none"> ○ Physician phone analyst (i.e. Independent Mental Health Providers)-4706 ○ Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4707 <p><u>Updates to Roll Call</u></p>
<p>6.</p>	